U.S. Department of Housing and Urban Development Office of Public and Indian Housing

Small PHA Plan Update
Annual Plan for Fiscal Year: 2001

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

PHA Plan Agency Identification

PHA Name: Mound City Public Housing
PHA Number: MO 033
PHA Fiscal Year Beginning: (mm/yyyy) 04/2001
PHA Plan Contact Information: Name: Ms. Judi Scarbrough Phone: 660/442-3832 IDD: 660/442-3832 Email (if available): mcphousing@msc.net
Public Access to Information Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply) Main administrative office of the PHA PHA development management offices
Display Locations For PHA Plans and Supporting Documents
The PHA Plans (including attachments) are available for public inspection at: (select all that apply) Main administrative office of the PHA PHA development management offices Main administrative office of the local, county or State government Public library PHA website Other (list below)
PHA Plan Supporting Documents are available for inspection at: (select all that apply) Main business office of the PHA PHA development management offices Other (list below)
PHA Programs Administered:
Public Housing and Section 8 Section 8 Only Public Housing Only

Annual PHA Plan Fiscal Year 2001

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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Plan text)	
Other (List below, providing each attachment name)	
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ii. Executive Summary	
[24 CFR Part 903.7 9 (r)]	
At PHA option, provide a brief overview of the information in the Annual Plan	

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

Summary of Policy and Program changes

The MCPH has not made nor intends to make any major policy or program changes in 2001. Local preferences were established and will not change, rent policies remain the same, community service policy parameters were included in our lease and ACOP and will be implemented on 4/1/01, and our family development pet policy has already been implemented.

2. Capital Improvement Needs [24 CFR Part 903.7 9 (g)]
Exemptions: Section 8 only PHAs are not required to complete this component.
A. X Yes No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?
B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 71,424
C. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.
D. Capital Fund Program Grant Submissions
(1) Capital Fund Program 5-Year Action Plan
The Capital Fund Program 5-Year Action Plan is provided as Attachment C
(2) Capital Fund Program Annual Statement
The Capital Fund Program Annual Statement is provided as Attachment B
3. Demolition and Disposition [24 CFR Part 903.7 9 (h)]
Applicability: Section 8 only PHAs are not required to complete this section.
1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component; if "yes", complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)
1a. Development name:
1b. Development (project) number:
2. Activity type: Demolition
Disposition
3. Application status (select one)
Approved
Submitted, pending approval
Planned application
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected:
6. Coverage of action (select one)
Part of the development
Total development
7. Relocation resources (select all that apply)
Section 8 for units Displication for units
☐ Public housing for units ☐ Preference for admission to other public housing or section 8
Other housing for units (describe below)
8. Timeline for activity:
a. Actual or projected start date of activity:
b. Actual or projected start date of relocation activities:
c. Projected end date of activity:
4. Voucher Homeownership Program
[24 CFR Part 903.7 9 (k)]
A. Tes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to next component; if "yes", describe each program using the table below (copy and complete questions for each program identified.)
B. Capacity of the PHA to Administer a Section 8 Homeownership Program The PHA has demonstrated its capacity to administer the program by (select all that apply): Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources

Printed on: 1/20/016:05 PM Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards Demonstrating that it has or will acquire other relevant experience (list PHA) experience, or any other organization to be involved and its experience, below): 5. Safety and Crime Prevention: PHDEP Plan [24 CFR Part 903.7 (m)] Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds. A. Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan? B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ C. Yes No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component. D. Yes No: The PHDEP Plan is attached at Attachment _____ 6. Other Information [24 CFR Part 903.7 9 (r)] A. Resident Advisory Board (RAB) Recommendations and PHA Response 1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s? 2. If yes, the comments are Attached at Attachment (File name) 3. In what manner did the PHA address those comments? (select all that apply) The PHA changed portions of the PHA Plan in response to comments A list of these changes is included Yes No: below or Yes No: at the end of the RAB Comments in Attachment _____.

of the RAB Comments in Attachment _____.

Other: (list below)

Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

- 1. Consolidated Plan jurisdiction: State of Missouri
- 2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

\boxtimes	The PHA has based its statement of needs of families in the jurisdiction on the
	needs expressed in the Consolidated Plan/s.
	The PHA has participated in any consultation process organized and offered by
	the Consolidated Plan agency in the development of the Consolidated Plan.
\boxtimes	The PHA has consulted with the Consolidated Plan agency during the
	development of this PHA Plan.
	Activities to be undertaken by the PHA in the coming year are consistent with
	specific initiatives contained in the Consolidated Plan. (list such initiatives below)
	Other: (list below)

- 3. PHA Requests for support from the Consolidated Plan Agency
- Yes No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:
- 4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

The State of Missouri's plan has established the following priorities to address housing needs, which are also the priorities of the Mound City Public Housing:

- Maintain its supply of decent, safe and sanitary rental housing that is affordable for low, very low and moderate income families.
- The modernization of MCPH housing for occupancy by low and very low income families.
- C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

The Mound City Public Housing's (MCPH) Definition of Substantial Deviation and Significant Amendment or Modification are as follows:

- changes to rent or admissions policies or organization of the waiting list;
- additions of non-emergency work items (items not intended in the current 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund; and
- any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

B. Significant Amendment or Modification to the Annual Plan:

The Mound City Public Housing's (MCPH) Definition of Substantial Deviation and Significant Amendment or Modification are as follows:

- changes to rent or admissions policies or organization of the waiting list;
- additions of non-emergency work items (items not intended in the current Annual Statement) or change in use of replacement reserve funds under the Capital Fund; and
- any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

<u>Attachment_A_</u> Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review					
Applicable & On Display	Supporting Document	Related Plan Component			
YES	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans			
YES	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans			
YES	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans			
YES	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs			
YES	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources			
YES	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies			
YES	Any policy governing occupancy of Police Officers in Public Housing Check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies			
N/A	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies			
YES	Public housing rent determination policies, including the method for setting public housing flat rents check here if included in the public housing A & O Policy	Annual Plan: Rent Determination			

List of Supporting Documents Available for Review					
Applicable & On Display	Supporting Document	Related Plan Component			
YES	Schedule of flat rents offered at each public housing development check here if included in the public housing A & O Policy	Annual Plan: Rent Determination			
N/A	Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination			
N/A	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance			
YES	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations			
YES	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency			
N/A	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations			
N/A	Any required policies governing any Section 8 special housing types check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance			
YES	Public housing grievance procedures check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures			
N/A	Section 8 informal review and hearing procedures check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures			
YES	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs			
YES	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs			
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs			
N/A	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs			
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition			
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing			

4 10 11	List of Supporting Documents Available for Rev			
Applicable & On Display	Supporting Document	Related Plan Component		
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing		
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership		
N/A	Policies governing any Section 8 Homeownership program (sectionof the Section 8 Administrative Plan)	Annual Plan: Homeownership		
YES	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency		
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency		
YES	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency		
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency		
N/A	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention		
N/A	PHDEP-related documentation: Baseline law enforcement services for public housing developments assisted under the PHDEP plan; Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; Coordination with other law enforcement efforts; Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.	Annual Plan: Safety and Crime Prevention		
YES	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) Check here if included in the public housing A & O Policy	Pet Policy		

List of Supporting Documents Available for Review				
Applicable & On Display	Supporting Document	Related Plan Component		
YES	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit		
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs		
-	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)		

Ann	ual Statement/Performance and Evalua	ation Report		
Cap	ital Fund Program and Capital Fund P	rogram Replacement	Housing Factor ((CFP
PHA N	Tame: Mound City Public Housing	Grant Type and Number		
		Capital Fund Program: MO16I	P033502	
		Capital Fund Program		
		Replacement Housing Factor		
	ginal Annual Statement			evised A
	formance and Evaluation Report for Period Ending:	Final Performance and		
Line	Summary by Development Account	Total Estimat	ted Cost	
No.				
		Original	Revised	
1	Total non-CFP Funds			
2	1406 Operations	14,284		
3	1408 Management Improvements			
4	1410 Administration	7,142		
5	1411 Audit			
6	1415 liquidated Damages			
7	1430 Fees and Costs	2,000		
8	1440 Site Acquisition			
9	1450 Site Improvement	12,998		
10	1460 Dwelling Structures			
11	1465.1 Dwelling Equipment—Nonexpendable			
12	1470 Nondwelling Structures	15,000		
13	1475 Nondwelling Equipment	20,000		
14	1485 Demolition			
15	1490 Replacement Reserve			
16	1492 Moving to Work Demonstration			
17	1495.1 Relocation Costs			
18	1498 Mod Used for Development			
19	1502 Contingency			
20	Amount of Annual Grant: (sum of lines 2-19)	71,424		
21	Amount of line 20 Related to LBP Activities			
22	Amount of line 20 Related to Section 504 Compliance			
23	Amount of line 20 Related to Security			
24	Amount of line 20 Related to Energy Conservation			
	Measures			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/Part II: Supporting Pages

	F					
PHA Name: Mour	nd City Public Housing	Grant Type and Number				
	, .	Capital Fund Program #: MO16P033502				
Capital Fund Program						
		Replacement I	Housing Factor #	:		
Development	General Description of Major Work	Dev. Acct No.	Quantity	Total Estimated Cost		
Number	Categories					
Name/HA-Wide				Original	Revised	
Activities						
HA-Wide	A. Housing Operations	1406	20%	14,284		
Operations	Subtotal			14,284		
HA Wide	A. Partial salary and benefits for staff	1410	10%	7,142		
Administrative	involved with capital fund activities.					
Cost	Subtotal			7,142		
HA-Wide	A. A/E Services	1430	100%	2,000		
Fees & Costs	Subtotal			2,000		
MO 33-1	A. Replace sidewalks and fencing	1450	1000 SF	12,998		
	B. Replace HVAC system in community building.	1470	1 sys	15,000		
	Subtotal			27,998		
HA-Wide	A. Replace maintenance equipment	1475	LS	20,000		
non-dwelling	Subtotal			20,000		
equipment						
	Grand Total			71,424	ļ	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/Part III: Implementation Schedule

Fart III: Impleme	entation Sci	leaule					
PHA Name: Mound City	Public Housin	ng Grant	t Type and Num	nber			Federal
1		Capit	Capital Fund Program #: MO16P033502				
		Capi	tal Fund Program	m Replacement Hous	ising Factor #:		
Development Number		und Obligat			ll Funds Expended		
Name/HA-Wide	(Quart	t Ending Da	ate)	(Qı	uarter Ending Date	;)	
Activities				1			
	Original	Revised	Actual	Original	Revised	Actual	
MO 33-1	4/03		T	4/05			
			1				
			1		 [
HA-Wide	4/03			4/05			
			1				
			†		 		
	1		†		 [+
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	1		+				
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Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

	CFP 5-Year Action Plan			
⊠ Original statem	nent Revised statement			
Development	Development Name			
Number	(or indicate PHA wide)			
	HA-Wide			
Description of Need	 led Physical Improvements or Management	Estimated Cost	Planned Start D	
Improvements	red 1 hybreal improvements of framagement	Estimated Cost	(HA Fiscal Year	
			(==== 1 25001 1 000	
Housing Operation	s	57	7,136 2002-2005	
	Administrative cost 28,568			
Replace office equip			9,998 2003	
Replace maintenan	ce vehicle	15	5,000 2003	
Total estimated cos	t over next 5 years	110	0,702	

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

	CFP 5-Year Action Plan			
⊠ Original statem	nent Revised statement			
Development	Development Name			
Number	(or indicate PHA wide)			
MO 33-1	Evans Circle			
D	L. I Disserved L. L. Common and C. C. Marine and C.	Esternated Cont		DI 1 C44 T
	led Physical Improvements or Management	Estimated Cost		Planned Start D
Improvements				(HA Fiscal Year
Replace bathroom	vanities		19,998	2002-2003
Replace entry door			8,000	2002
Repair/replace side			20,000	2005
Total estimated cos	t over next 5 years		47,998	

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

	CFP 5-Year Action Plan		
Original state	ment Revised statement		
Development	Development Name		
Number	(or indicate PHA wide)		
MO 33-2	McRae Apartments		
Description of Ne	eded Physical Improvements or Management	Estimated Cost	Planned Start I
Improvements	•		(HA Fiscal Year
Replace garage de Install additional Install basement of Replace appliance Replace exterior s	security lighting doors es	15,000 2,000 12,000 8,000 89,996	2002 2002 2002
Total estimated co	ost over next 5 years	126,996	

PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

A. Amount of PHDEP Grant \$			
B. Eligibility type (Indicate with an "x")	N1	N2_	
R			
C. FFY in which funding is requested			
D. Executive Summary of Annual PHDEP I			
In the space below, provide a brief overview of the PHDE activities undertaken. It may include a description of the emore than five (5) sentences long			
E. Target Areas			
Complete the following table by indicating each PHDEP			
will be conducted), the total number of units in each PHD individuals expected to participate in PHDEP sponsored a			
information should be consistent with that available in PI		r ranget Are	a. Omi count
PHDEP Target Areas (Name of development(s) or site)	Total # of Un the PHDEF		Total Population to be Served within
(rvame of development(s) or site)	Area(_	the PHDEP Target Area(s)
(Avame of development(s) or site)		_	the PHDEP Target
(ivame of development(s) or site)		_	the PHDEP Target
(Name of development(s) or site)		_	the PHDEP Target
		_	the PHDEP Target
F. Duration of Program Indicate the duration (number of months funds will be recthis Plan (place an "x" to indicate the length of program by	Area(IDEP Progr	the PHDEP Target Area(s)
F. Duration of Program Indicate the duration (number of months funds will be recthis Plan (place an "x" to indicate the length of program by	Area(quired) of the PH by # of months.	IDEP Progr For "Other"	the PHDEP Target Area(s) am proposed under , identify the # of
F. Duration of Program Indicate the duration (number of months funds will be recthis Plan (place an "x" to indicate the length of program be months).	Area(quired) of the PH by # of months.	IDEP Progr For "Other"	the PHDEP Target Area(s) am proposed under , identify the # of
F. Duration of Program Indicate the duration (number of months funds will be recthis Plan (place an "x" to indicate the length of program be months).	puired) of the PF by # of months.	IDEP Progr For "Other"	am proposed under dentify the # of

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY 1995						

closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place

"GE" in column or "W" for waivers.

FY 1996			
FY 1997			
FY 1998			
FY 1999			

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FFY PHDEP Budget Su	ımmary
Original statement	
Revised statement dated:	<u> </u>
Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TA Match	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 - Reimbursement of Law Enforcement					Total PH	IDEP Funding: \$
Goal(s)						
Objectives						
Proposed Activities	# of	Target	Start	Expected	PHEDE	Other Funding
	Persons	Population	Date	Complete	P	(Amount/
	Served			Date	Funding	Source)
1.						
2.						
3.						

9115 - Special Initiative					Total PHD	EP Funding: \$
Goal(s)						
Objectives						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)
1.						
2.						
3.						

9116 - Gun Buyback TA Match					Total PHI	DEP Funding: \$	
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	
1.							
2.							
3.							

9120 - Security Personnel					Total PHDEP F	unding: \$
Goal(s)						
Objectives						
Proposed Activities	# of	Target	Start	Expected	PHEDEP	Other Funding
	Persons	Population	Date	Complete	Funding	(Amount /Source)
	Served	_		Date		
1.						
2.						
3.						

9130 – Employment of Investigators				Total PHDEP F	unding: \$	
Goal(s)						
Objectives						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)
1.						
2.						
3.						

9140 – Voluntary Tenant Patrol					Total PHDEP F	unding: \$
Goal(s)						
Objectives						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)
1.						
2.						
3.						

9150 - Physical Improvements					Total PHDEP I	Funding: \$	
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	
1.							
2.							
3.							

9160 - Drug Prevention					Total PHDEP Funding: \$		
Goal(s)		.		<u> </u>	-	-	
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	
1.							
2.							

9170 - Drug Intervention					Total PHDEP Funding: \$	
Goal(s)					-11	
Objectives						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)
1.						
2.						
2						

3.

9180 - Drug Treatment					Total PHDE	P Funding: \$	
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	
1.							
2.							
3.							

9190 - Other Program Costs			Total PHDEP Funds: \$				
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	
1.							
2.							
3.							

Required Attachment D Resident Member on the PHA Governing Board

1. X Yes No:	Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)						
A. Name of resident m	A. Name of resident member(s) on the governing board:						
Ms. Dorothy Beesley							
B. How was the reside							
C. The term of appoint	C. The term of appointment is (include the date term expires):						
5/97 to 1/01							
assisted by the I	PHA, why not? The PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis the PHA has less than 300 public housing units, has provided easonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any esident of their interest to participate in the Board. Other (explain):						
B. Date of next term of	expiration of a governing board member:						
C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position):							

Required Attachment E: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Cora Belle Yount
Corene Hanner
Velma Diggs
Virginia Steele
Virginia Cotton
Joseph Morris
Thelma Bahl
Charles Weaver
Alaberta Linck
Dorothy Beesley
Dorothy Beesley
Dorothy Hayes
Velma Diggs
Virginia Cotton
Thelma Bahl
John McLean
Linda Brown
Sharon Hufford

Attachment F: Progress in meeting the 5-Year Plan Mission and Goals

The MCPH has been able to maintain its mission to promote adequate and affordable housing, economic opportunity and a suitable living environment from discrimination through the utilization of FY 99/00 Capital funds and the proper application of our public housing policies.

We are continuing to address public housing vacancies very aggressively and our PHAS scores indicate that other operational issues are being satisfactorily addressed.

Capital funds have been utilized to provide modernization of our property and our FY 2001 application will continue that effort.

MCPH has implemented local preferences to improve the living environment by addressing deconcentration, promoting income mixing and improving security throughout our development.

The MCPH created and continues to facilitate self-sufficiency programs to improve resident employability as well as solicit support services for the elderly and families with disabilities.

We are confident that the MCPH will be able to continue to meet and accommodate all our goals and objectives in FY 2001.